



Federal Regulation, S1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Application Serial No.      Filing Date (d/m/y)      Status (Patented, Pending, Abandoned)

We hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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UNITED STATES OF AMERICA

We hereby declare that all statements made herein of our own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00 Full name of sole or first inventor:- Sarah Anne ROBERTSON

Residence: 24 St. Peters Street, St. Peters, South Australia 5069, Australia Aux

Post Office Address: Same as above

Country of Citizenship AUSTRALIA

20 August 1999  
Date

Sarah Anne Robertson  
Sarah Anne Robertson

2-00 Full name of second inventor:- Kelton Paul TREMELLEN

Residence: 3 Wallace Street, Vale Park, South Australia 5081, Australia. Aux

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Country of Citizenship AUSTRALIA

20<sup>th</sup> August 1999  
Date

Kelton Paul Tremellen  
Kelton Paul Tremellen

Applicant or Patentee: LUMINIS PTY LTD

Serial or Patent No.: To Be assigned

Attorney Docket No.:

Filed on: 6th March 1998

For: TREATMENT AND DIAGNOSIS OF AN INFERTILITY CONDITION

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9(F) AND 1.27(C)) - SMALL BUSINESS CONCERN

I hereby declare that I am

☐ the owner of the small business concern identified below:

☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN : LUMINIS PTY LTD an Australian Company

ADDRESS OF CONCERN: 1st Floor 10-20 Pulteney Street, Adelaide, State of South Australia 5000, Australia

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 1.21.3-18, and reproduced in 37 CFR 1.9(d), for the purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention entitled TREATMENT AND DIAGNOSIS OF AN INFERTILITY CONDITION of inventors SARAH ANNE ROBERTSON and KELTON PAUL TREMELLEN described in

☐ the specification filed herewith.

☒ application serial no. PCT/AU98/00149 filed 6th March 1998

☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). \*NOTE: Separate verified statements are required from each named person, concern or organization having rights to this invention averring to their status as small entities. (37 CFR 1.27).

FULL NAME


ADDRESS

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING P R Hart  
TITLE OF PERSON MANAGING DIRECTOR  
ADDRESS OF PERSON SIGNING 10 PULTNAM ST ADRIAN DR 5200

SIGNATURE   
DATE 20 AUG 99

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